



Form CPF M 102: Campaign Finance Report Municipal Form

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Office of Campaign and Political Finance

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Commonwealth
of Massachusetts

19 OCT 22 PM 7:43

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: May 1, 2019 Ending Date: Oct 28, 2019

Type of Report: (Check one)

- 8th day preceding preliminary
 8th day preceding election
 30 day after election
 year-end report
 dissolution

Pamela Lynn Gilday
Candidate Full Name (if applicable)

City Councilor ~ District 1
Office Sought and District

25 Monroe St Amesbury MA 0913
Residential Address

E-mail: councilorgilday@amesburyma.gov

Phone # (optional): 978 388 5452

Committee to Elect Pam Gilday
Committee Name

Robert Gilday
Name of Committee Treasurer

25 Monroe St
Committee Mailing Address

E-mail: pgilday@comcast.net

Phone # (optional): 978 388 5452

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>68.26</u>
Line 2: Total receipts this period (page 3, line 11)	<u>0</u>
Line 3: Subtotal (line 1 plus line 2)	<u>68.26</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>0</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>68.26</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0</u>
Line 8: Name of bank(s) used:	<u>The Provident Bank</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Robert Gilday (Treasurer's signature) Date: 10/25/2019

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Pamela L Gilday (Candidate's signature) Date: 10/25/2019



Customer Service
1-877-487-2977
Telephone Banking
1-800-815-7056
Website
TheProvidentBank.com

5 Market St.
Amesbury, MA 01913

Return Service Requested

007595



COMMITTEE TO ELECT PAM GILDAY
25 MONROE ST
AMESBURY MA 01913-3412

Account Number: xxxxxxxx5902
Statement Date: May 01, 2019 thru May 31, 2019

Summary - All Accounts

Product	Account #	Ending Balance
Basic Business Checking	xxxxxxx5902	\$68.26

Basic Business Checking - xxxxxxxx5902

Date	Transaction Description	Withdrawal	Deposit	Balance
	BEGINNING BALANCE			\$68.26
	No activity this period.			
	ENDING BALANCE			\$68.26

Overdraft/Returned Item Fees

Fee Type	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Account Summary

Previous Date	Beginning Balance	Deposits	Interest Paid	Withdrawals	Fees	Ending Balance
May 01, 2019	68.26	0.00	0.00	0.00	0.00	68.26

Attention All Mobile Users:



The Provident Bank will require all checks deposited via our online banking app or business remote deposit app to include the endorsement of 'Deposited via Mobile Deposit' on the back of the check. Please contact our Customer Service Center at 1-877-487-2977 if you have any questions.



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Website
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5 Market St.
Amesbury, MA 01913

Return Service Requested

007424



COMMITTEE TO ELECT PAM GILDAY
25 MONROE ST
AMESBURY MA 01913-3412

Account Number: xxxxxxxx5902
Statement Date: Jun 29, 2019 thru Jul 31, 2019

Summary - All Accounts

Product	Account #	Ending Balance
Basic Business Checking	xxxxxxx5902	\$68.26

Basic Business Checking - xxxxxxxx5902

Date	Transaction Description	Withdrawal	Deposit	Balance
	BEGINNING BALANCE			\$68.26
	No activity this period.			
	ENDING BALANCE			\$68.26

Overdraft/Returned Item Fees

Fee Type	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Account Summary

Previous Date	Beginning Balance	Deposits	Interest Paid	Withdrawals	Fees	Ending Balance
Jun 29, 2019	68.26	0.00	0.00	0.00	0.00	68.26

Foreign Draft Services Notice



Beginning on September 1st, The Provident Bank will begin offering its customers foreign draft services. There will be a \$5 fee per foreign draft item, and a delivery fee of \$10 when delivered to a branch location or \$15 when delivered to a client's address. Stop payments for foreign drafts will not incur a fee, but funds will be returned at the current exchange rate. Please visit one of our branch locations or call us at 1-877-487-2977 for additional information.